

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF ARKANSAS
JONESBORO DIVISION

MARK AMOS BARKER

PLAINTIFF

V.

No. 3:18CV00137-DPM-JTR

RONNIE COLEMAN, Jail Administrator,
Crittenden County Jail, *et al.*

DEFENDANTS

ORDER

Defendants filed a Motion to Compel Plaintiff Mark Amos Barker (“Barker”) to provide an executed medical authorization form granting them permission to obtain copies of his medical records. *Doc. 44*. According to Defendants, Barker then provided an executed authorization form, identifying the Arkansas Department of Correction (“ADC”) as his only health care provider. *Doc. 46*.

Defendants’ Motion is denied as moot regarding an authorization form for Barker’s ADC medical records, but granted as to records from any medical providers other than the ADC. If Barker intends to rely on medical records from any provider other than the ADC, he must: (1) identify those medical providers to Defendants; and (2) provide Defendants with an executed medical authorization form, **leaving the “Health Care Provider” line blank.**¹ If Barker refuses to sign a form allowing

¹As explained by Defendants’ counsel, their office will photocopy Barker’s executed authorization form, complete the “Health Care Provider” line for each medical provider identified by Barker, and request copies of each provider’s records. *Doc. 44-1 at 1; Doc. 46*.

Defendants' counsel access to non-ADC medical records, he will be prohibited from introducing or otherwise relying on those records to support his claims in this lawsuit.

IT IS THEREFORE ORDERED THAT:

1. Defendants' Motion to Compel (*Doc. 44*) is DENIED in part and GRANTED in part, as set forth in this Order.
2. The Clerk is directed to mail Barker another copy of the Authorization to Disclose Health Information form (*Doc. 44-1 at 9*).
3. If Barker intends to rely on medical records from any provider other than the ADC, he must, **within fourteen (14) days of the date of this Order**: (a) identify each medical provider; and (b) sign and mail to Defendants' counsel the medical authorization form, **leaving the "Health Care Provider" line blank**.

DATED this 21st day of October, 2019.



UNITED STATES MAGISTRATE JUDGE